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## BIB DATA SHEET

CONFIRMATION NO. 2504

<b>SERIAL NUMBER</b> 10/026,413	<b>FILING or 371(c) DATE</b> 12/21/2001 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> S63.2-10234-US01	
<b>APPLICANTS</b> Brent C. Gerberding, Alameda, CA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/06/2002					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /DAVID C COMSTOCK/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> <del>5</del> 4	<b>TOTAL CLAIMS</b> <del>24</del> 21	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> VIDAS, ARRETT & STEINKRAUS, P.A. SUITE 400, 6640 SHADY OAK ROAD EDEN PRAIRIE, MN 55344 UNITED STATES					
<b>TITLE</b> Stent geometry for improved flexibility					
<b>FILING FEE RECEIVED</b> 812	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		

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